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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* None  
 AL

\*\* FOREIGN APPLICATIONS \*\*\*\*\* None  
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IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY IL	SHEETS DRAWING 4	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 3
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 04743  
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TITLE  
 Smart tray system and method for restaurant inventory management

FILING FEE  RECEIVED 986	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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